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CONFIRMATION NO. 7497

<b>SERIAL NUMBER</b> 10/743,118	<b>FILING OR 371(c) DATE</b> 12/22/2003 <b>RULE</b>	<b>CLASS</b> 424	<b>GROUP ART UNIT</b> 1618	<b>ATTORNEY DOCKET NO.</b> 208-015US1
<b>APPLICANTS</b> Fred Wehling, New Hope, MN; Mary Aldritt, Excelsior, MN; Robert E. Lee, Hudson, WI; Jason A. Kallestad, Minneapolis, MN;				
<b>** CONTINUING DATA *****</b> <i>None.</i>				
<b>** FOREIGN APPLICATIONS *****</b> <i>None.</i>				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY **</b> ** 04/01/2004				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Verified and Acknowledged <i>Agadisteleven</i> <i>SJR.</i> (Examiner's Signature) Initials		<b>STATE OR COUNTRY</b> MN	<b>SHEETS DRAWING</b>	<b>TOTAL CLAIMS</b> 36
				<b>INDEPENDENT CLAIMS</b> 4
<b>ADDRESS</b> 27791				
<b>TITLE</b> Therapeutic effervescent composition				
<b>FILING FEE RECEIVED</b> 637	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	